

PTO/SB/17 (12-04)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/927,625
		Filing Date	08/09/2001
		First Named Inventor	Clemas
		Examiner Name	Teal, Henry
		AI Unit	2183
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	QUA-103
TOTAL AMOUNT OF PAYMENT (\$)		325	

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 502888 Deposit Account Name: Andrei D. Popovici Patents

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Small Entity Fee (\$)
Fee (\$) 50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Fee (\$)
Fee (\$) 200 100

Multiple dependent claims Fee (\$)
Fee (\$) 360 180

Total Claims 29 - 20 or HP = 9 **Extra Claims** 9 **Fee (\$)** 25 **Fee Paid (\$)** 225

HP = highest number of total claims paid for, if greater than 20

Indep. Claims 12 - 3 or HP = 1 **Extra Claims** 1 **Fee (\$)** 100 **Fee Paid (\$)** 100

HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims

Fee (\$) **Fee Paid (\$)**

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).

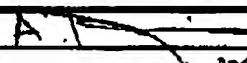
Total Sheets 300 **Extra Sheets** 200 **Number of each additional 50 or fraction thereof** 4 **Fee (\$)** 1000 **Fee Paid (\$)** 1000

100 = 100 / 50 = 2 (round up to a whole number) x 250

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY		Registration No.	42,401	Telephone	(650) 233-1898
Signature		(Attorney/Agent)		Date	12/9/2004
Name (Print/Type)		Andrei D. Popovici			

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1480, Alexandria, VA 22313-1480. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1480.

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